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TED R. RITTMASTER FOLEY & LARDNER 2029 CENTURY PARK EAST, SUITE 3500 LOS ANGELES,, CA 90067-3021				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile ransmitted to the USPTO, on the date indicated below.		
				Jose Ramos (Dopositor's name)		
· .				September 9, 2004 (Date)		
APPLICATION NO	*** *********************************					(Date)
09/768,035	FILING DATE		FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.
,	01/22/2001 Ronald J. Lebe ENTION: AMBULATORY MEDICAL APPARATUS AND METHOD USING				USP-1076-B	2696
THE OF INVENTION, A	MBULATURI MEDICAL	AFFARATOSAN	D METHOD USING	A ROBUST COMMU.	NICATION PROTOCOL	•
APPLN, TYPE	SMALL ENTITY	ISSUE FE		BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	09/20/2004
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ROBINSON, DANIEL LEON 3742				600-300000		
UChange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Liver Address form PTO/SB/122) attached.				the patent front page, list (1) the 3 registered patent attorneys or tively, (2) the name of a single member a registered attorney or nes of up to 2 registered patent s. If no name is listed, no name 3		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print of type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Comple. on of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CI) 1 and STATE OR COUNTRY) MEDTRONIC MINIMED, INC. NORTHRIDGE, CA						
Please check the appropriate assignee category or categories (will not be printed on the patent);				☐ individual		
4a. The following fec(s) are enclosed: 4b. Payment of Fec(s):						
XI Publication Fee				ount of the fec(s) is enclosed. card. Form PTO-2038 is attached.		
14				reby authorized by charge the required fee(s), or credit any overpayment, to		
Deposit Account Ni Director for Patents is requested to apply the issue Fee and Publication Fee (if any) or to re-appl						
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Ted R. Bittmaşter, Reg. 32:933 Segtember 9, 2004 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.				09/15/2004 RMEBRAH1 00000098 09768035		
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N THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Ronald J. LEBEL, et al.

Title:

AMBULATORY MEDICAL

APPARATUS AND METHOD USING A ROBUST COMMUNICATION .

PROTOCOL

Appl. No.:

09/768,035

Filing Date:

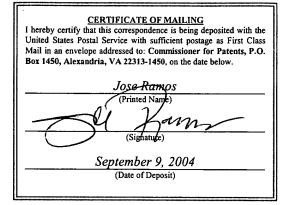
1/22/2001

Examiner:

Daniel L. RObinson

Art Unit:

3742



ISSUE FEE TRANSMITTAL

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B) along with a check in the amount of \$1,663.00 for payment of the Issue Fee, Publication Fee and 11 additional copies of the issued utility patent.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Respectfully submitted:

Date:

September 9, 2004

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(310) 975-7963

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(310) 557-8475

/By: /

Ted R. Rittmaster Attorney for Applicant Registration No. 32,933